

MY CONCERN IS ABOUT:

PERSONAL CARE

Bathing
Feeding
Grooming

TREATMENTS

Wound Care
Breathing

MEDICATIONS

Starting
Stopping
Changing

MEDICATION ADMINISTRATION

Frequency
Dosage

DIET ORDERS

Soft
Pureed
Thickened Liquids

I SHOULD SPEAK TO:

1) The specific C.N.A. assigned to your loved one on duty for that particular shift or the shift where questions regarding care came up

2) Director of Nursing (DON) if CNA's aren't consistent

1) RN or Charge Nurse for each shift

2) DON (*Document the care you've observed*)

1) DON or Charge Nurse

2) MD (*This is the **key** decision maker, however the doctor relies on the advice of other health professionals*)

1) Charge Nurse for the shift

2) DON

1) Dietary Director (*If the doctor has ordered these precautions, but they're not being carried out properly*)

2) DON (*If you notice choking or gagging, the DON should request an assessment by either the Speech or Occupational Therapist*)

3) ST or OT

4) MD

MY CONCERN IS ABOUT:

NUTRITION

Health content
Portion/Serving Size
Substitutions

FOOD APPEARANCE

Texture
Temperature
Preferences

LAUNDRY

Missing Clothing
Dirty Clothing

CLEANLINESS

Inside the facility
Outside the facility

ASSISTIVE DEVICES

Wheelchair
Walker
Cane

FINANCIAL ISSUES

Questions & Explanations
regarding bills and billing methods
Medicare/Medicaid Coverage

I SHOULD SPEAK TO:

1) Dietician

2) Dietary Director

3) Charge Nurse

1) Dietary Director

2) Dietician

1) Person in charge of laundry (*This may
be the Head of Housekeeping*)

2) Administrator

1) Head of Housekeeping

2) Head of Maintenance

3) Administrator

1) Charge Nurse

2) DON

3) PT or OT

1) Business Director

2) Administrator